

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 58952(49363)		
Application No. 10/623,200-Conf. #2841	Filing Date July 18, 2003	Examiner T. K. Heller	Art Unit 3766		
Applicant(s): Thomas P. Osypka					
Invention: IMPLANTABLE CARDIAC LEAD HAVING REMOVABLE FLUID DELIVERY PORT					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>		- 20 =		x	
<b>Independent Claims</b>		- 3 =		x	
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b> Extension for response within first month					60.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					60.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>60.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
/Michael J. Pollack/ Michael J. Pollack Attorney/Agent Reg. No.: 53,475  EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (203) 353-6848			Dated: <u>April 14, 2008</u>		

## Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this correspondence is being transmitted via the Office electronic filing system in accordance with 37 CFR 1.6(a)(4):

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on April 14, 2008  
Date

/Michael J. Pollack/

Signature

Michael J. Pollack

Typed or printed name of person signing Certificate

53,475

Registration Number, if applicable

(203) 353-6848

Telephone Number

Note:

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Response to Non-Final Office Action (8 pages)  
Amendment Transmittal (1 page)  
Charge \$60.00 to deposit account 04-1105